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CONFIRMATION NO. 6203

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09/489,739	01/21/2000 RULE	705	3692	

**APPLICANTS**  
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**\*\* CONTINUING DATA \*\*\*\*\***  
 This appln claims benefit of 60/117,260 01/26/1999 and claims benefit of 60/117,261 01/26/1999 and claims benefit of 60/127,512 04/02/1999

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\***  
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NY	SHEETS DRAWING 6	TOTAL CLAIMS 13 <sup>12</sup>	INDEPENDENT CLAIMS 6 <sup>4</sup>
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature: <u>F. B. INNH</u> Initials: <u>AP</u>				

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**TITLE**  
 Invention in Finance

FILING FEE RECEIVED 852	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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